



# UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/223,016	12/30/1998	SCOTT L. MINNEMAN	100126	2341

7590 08/05/2003

OLIFF & BERRIDGE  
P O BOX 19928  
ALEXANDRIA, VA 22320

EXAMINER

CHIEU, PO LIN

ART UNIT PAPER NUMBER

2615

DATE MAILED: 08/05/2003

#19

Please find below and/or attached an Office communication concerning this application or proceeding.

## Interview Summary

**Application No.**

09/223,016

**Applicant(s)**

MINNEMAN ET AL.

**Examiner**

Polin Chieu

**Art Unit**

2615

All participants (applicant, applicant's representative, PTO personnel):

(1) Polin Chieu.

(3) \_\_\_\_\_.

(2) Mark Woodall.

(4) \_\_\_\_\_.

Date of Interview: 04 August 2003.

Type: a) ☒ Telephonic b) ☐ Video Conference

c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.

If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: \_\_\_\_\_.

Identification of prior art discussed: \_\_\_\_\_.

Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☒ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The faxed copy of the certified amendment with a PTO stamp indicating a dated receipt of 4/4/03 has been received. The Final Rejection mailed 6/18/03 is hereby vacated. An Office Action on the merits will be forthcoming.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.



Examiner's signature, if required